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PTO/SB/01 (8-96)
 Approved for use through 9/30/98. OMB 0651-0032
 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number ASERVIER 458 PCT

First Named Inventor

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"NEW PHENYLNAPHTHALENE COMPOUNDS"

the specification of which

(Title of the invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

11 / 04 / 2003

as United States Application Number or PCT International

Application Number

PCT/FR2003/003278

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02.13917	FRANCE	11.07.2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **CUSTOMER NUMBER: 25,666**

Name	Registration Number	Name	Registration Number
G. PATRICK SAGE	37,710	MICHELE CUDAHY	55,093

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.


Direct all correspondence to:

Name		<p align="center">THE FIRM OF HUESCHEN AND SAGE PLLC ATTORNEYS AND COUNSELORS 500 COLUMBIA PLAZA 350 EAST MICHIGAN AVENUE KALAMAZOO, MICHIGAN 49007-3856</p>
Address		
Address		
City		
Country		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	Sophie	Middle Initial		Family Name	POISSONNIER-DURIEUX	Suffix e.g. Jr.		
Inventor's Signature	 POISSONNIER-DURIEUX <i>Sophie</i>				Date	04/14/2005		
Residence: City	RAINNEVILLE		State	FR	Country	FRANCE		
					Citizenship	French		
Post Office Address	4, rue de Saint Gratien							
Post Office Address								
City	RAINNEVILLE		State	FR	Zip	80260	Country	FRANCE

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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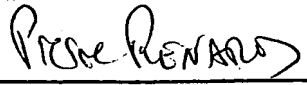
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Said	Middle Initial		Family Name	YOUS	Suffix e.g. Jr.	
Inventor's Signature					Date	04/14/2005	
Residence: City	LOOS	State	FR	Country	FRANCE	Citizenship	French
Post Office Address	Résidence Marthe Alexandre - Appartement 12 - 10, rue Lamartine						
Post Office Address							
City	LOOS	State	FR	Zip	59120	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Daniel	Middle Initial		Family Name	LESIEUR	Suffix e.g. Jr.	
Inventor's Signature	LESIEUR Daniel				Date	04/14/2005	
Residence: City	GONDECOURT	State	FR	Country	FRANCE	Citizenship	French
Post Office Address	20, rue de Verdun						
Post Office Address							
City	GONDECOURT	State	FR	Zip	59147	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Caroline	Middle Initial		Family Name	BENNEJEAN	Suffix e.g. Jr.	
Inventor's Signature	Caroline Bennejean				Date	04/14/2005	
Residence: City	CHARENTON-LE-PONT	State	FR	Country	FRANCE	Citizenship	French
Post Office Address	139, rue de Paris						
Post Office Address							
City	CHARENTON-LE-PONT	State	FR	Zip	94220	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Philippe	Middle Initial		Family Name	DELAGRANGE	Suffix e.g. Jr.	
Inventor's Signature	DELAGRANGE Philippe				Date	04/14/2005	
Residence: City	ISSY-LES-MOULINEAUX	State	FR	Country	FRANCE	Citizenship	French
Post Office Address	24, boulevard des Frères Voisins						
Post Office Address							
City	ISSY-LES-MOULINEAUX	State	FR	Zip	92130	Country	FRANCE
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Pierre	Middle Initial		Family Name	RENARD	Suffix	
Inventor's Signature					Date	04/14/2005	
Residence: City	LE CHESNAY	State	FR	Country	FRANCE	Citizenship	
Post Office Address	3, avenue du Parc						
Post Office Address							
City	LE CHESNAY	State	FR	Zip	78150	Country	FRANCE
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							